Douglas L. Patch (Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 30 2018

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PLEASE PRINT				NEW HAMP
I. Name of Lobbyist(s) <u>Douglas L. Pa</u>	atch			
II. Name of lobbyist's partnership, firm	or corporation, if a	ny:		
Orr & Reno, P.A.				
(Name of partnership, firm	or corporation)			
45 S. Main Street, P.O. Box 3550 Business Address: (Street)	Concord (Town/City)		NHState)	03302 (Zip Code)
(603) <u>224-2381</u> (6 (Telephone) (6	03) <u>224-2318</u> (Fax)		dpatch@orr-r	eno.com
III. This statement covers: (Choose one reportable expense transactions which a	- file separate repor re not attributable t	ts for each client, to any one client).	OR you may file	a separate report for
☑ All reportable transactions occurring in	the months prior to	the reporting date r	elative to the follo	wing client:
RESA (Retail Energy Supply Ass	sociation, Inc.)			
(Full Name of Client OR	as it appears on the Lo	bbyist Registration F	'orm)	
☐ All reportable transactions by the lobbyi unrelated to any particular client.	st (including the lob	byist's family), or	the lobbying firm l	listed below which are
IV. Date of Report April 25, 2018 🛚		July 25, 2		
Reports cover: activity from date of registre	_	activity from 4/1/	_	
October 31, 2018 activity from 7/1/18 to		January 30 activity from 10/		
V. There have been no fees received a If this box is checked, complete just this for Concord, NH 03301.				
VI. Check if additional reports are attacl	ned:			
If you have received fees or made expe	nditures, you must fi	ile Addendum A –	Fees and Expense	s
☐ If you have paid an honorarium or reim Expense Reimbursement	bursed expenses, yo	u must file Adden e	dum B– Report of	Honorariums or
☐ If you, your firm, or your family has m	ade political contribu	itions, you must fil	e Addendum C-	Political Contributions
Sworn Statement/Affirmation by Lobbyi I have read RSA 15, RSA 15-B, RSA 14-C and complete to the best of myknowledge a	and RSA 664 and he	ereby swear or affii 04/25/	/18	ng information is true
(Signature of Vobbyist)			(Date)	

E A S E P R I N

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) <u>Douglas L. Patch</u> II. Name of lobbyist's partnership, firm or corporation, if any:				
Own & Davis D.A				
(Name of partnership, firm or corporation)				
III. Name of Client RESA (Retail Energy Supply Association, Inc.))Date _0_	1/25/18		
IV. Fees Received Indicate the gross amount of all fees received from the client identified abov to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	nt relations, or	public relations servic		
a) Total of all fees received in this reporting period	a) \$	14,000.00		
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ year)	0.00		
c) Total of all fees received to date (Add lines a and b)	c) \$	14,000.00		
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00		
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office of individual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example: purchase of a meal with vaceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported.	client and if exmay be filed may be filed me aggregate to expenses; (b) the cle: meals purchases than \$10 the clied with a valuoring period of lue of greater ter than \$25, bs, expense reir	xpenditures are made for the lobbyist(s)/fir stal of all expenses pathe aggregate total of chased during a busine at is given to the perse of \$25.00 or less); a of greater than \$25.00 of than \$25, purchase of out not greater than \$3 mbursement, or politic		
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	50.00		
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00		
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00		

d) Total expenses for this reporting period	d) \$	50.00
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0.00
f) Total of all expenses year to date	f) \$	50.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees du	tring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the fore	going information
(Signature of lobbyist)	04/25/18 (Da	
	(Da	
Douglas L. Patch (Print Name of lobbyist)		
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State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation Name of Client (leave blank if Statement is for the particular client): <u>RESA (Retail Energy Supply</u>	partnership, firm, or corporation and not related to any
Date of Report (check one):	
April 25, 2018 ☑ July 25, 2018 ☐ Oct	ober 31, 2018 □ January 30, 2019 □
	tement of Income and Expenses described above, and ement (insert the number of Addendum forms being
1 Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing informa complete to the best of my knowledge and belief. (Signature of lobbyist)	tion on the Statement and each Addendum is true and $\frac{04/25/18}{\text{(Date)}}$
Douglas L. Patch	-
(Print Name of Johnvist)	